

Fax Cover Sheet

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DATE: February 5, 2003 TIME: 5:43 PM

TO: Examiner M. Willis PHONE: (703) 305-1679
 GAU 1617 FAX: (703) 872-9306

FROM: Dorene M. Price PHONE: (631) 531-1194
 Estée Lauder Companies FAX: (631) 744-3594

RE: Response to Office Action Serial No. = 09/773,351

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1. Certificate of Transmission by Facsimile
2. Amendment Transmittal
3. Amendment (6 pp)

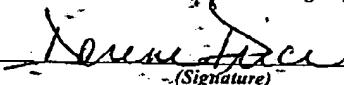
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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)		Docket No.
Applicant(s): Maes et al.		00.22US

Serial No. 09/773,351	Filing Date January 31, 2001	Examiner Willis, M.	Group Art Unit 1617
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Invention: Cholesterol Sulfate and Amino Sugar Compositions for Enhancement of Stratum Corneum Function

I hereby certify that this Cert, Amend Trans, Amend (6 pgs)
(Identify type of correspondence)
 is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 703-872-9306)
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DORENE M. PRICE
(Typed or Printed Name of Person Signing Certificate)

(Signature)

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AMENDMENT TRANSMITTAL LETTER (Large Entity)		Docket No. 00.22US
Applicant(s): Maes et al.		

Serial No. 09/773,351	Filing Date January 31, 2001	Examiner Wills, M.	Group Art Unit 1617
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Invention: - Cholesterol Sulfate and Amino Sugar Compositions for Enhancement of Stratum Corneum Function

TO THE ASSISTANT COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	19	20	0	X \$18.00	\$0.00
INDEP. CLAIMS	4	4	0	X \$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

- No additional fee is required for amendment.
- Please charge Deposit Account No. _____ in the amount of _____
A duplicate copy of this sheet is enclosed.
- A check in the amount of _____ to cover the filing fee is enclosed.
- The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 05-1320
A duplicate copy of this sheet is enclosed.
 - Any additional filing fees required under 37 C.F.R. 1.16.
 - Any patent application processing fees under 37 CFR 1.17.

Dorene Price
Signature

Dated: - February 5, 2003

Dorene M. Price (Reg. No. 43,018)
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I certify that this document and fee is being deposited on February 5, 2003 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.6 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231. at 703-872-9306.
<i>Dorene Price</i> Signature of Person Mailing Correspondence
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